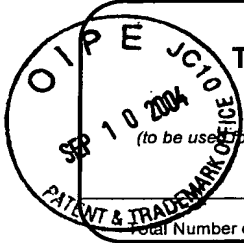


09-13-04

PTO/SB/21 (02-04)

Approved for use through 07/31/2006. OMB 0651-0031  
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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Application Number	10/696,900
Filing Date	October 30, 2003
First Named Inventor	Wilson et al
Art Unit	1635
Examiner Name	Brian A. Whiteman
Attorney Docket Number	GNV31AUSA/UPN-K1774CON

Total Number of Pages in This Submission

4

**ENCLOSURES (Check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below): 2-Documents
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**Remarks**

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**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	HOWSON AND HOWSON Cathy A. Kodroff
Signature	<i>Cathy Kodroff</i>
Date	September 10, 2004

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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GNV31AUSA/UPN-K1774CON

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No. : 10/696,900 Confirmation No.: 1181  
Applicant : Wilson et al  
Filed : October 30, 2003  
TC/A.U. : 1635  
Examiner : Brian A. Whiteman  
Customer No. : 00270  
Title : ADENO-ASSOCIATED VIRUS SEROTYPE 1  
NUCLEIC ACID SEQUENCES, VECTORS AND  
HOST CELLS CONTAINING SAME

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**FIFTH SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

Sirs:


Applicant submits to the Examiner the attached Form PTO/SB/08B document listing and this paper pursuant to 37 CFR § 1.56 and § 1.97-1.98. Form PTO/SB/08B is attached and copies of the documents are enclosed herewith. This Information Disclosure Statement is submitted more than three months from the filing date of this application and before the receipt of a first Office Action on the merits. Therefore, no fees are believed due.

The Director is hereby authorized to charge any deficiency in any fees due with the filing of this paper or credit any overpayment in any fees to our Deposit Account Number 08-3040.

The Examiner is respectfully requested to consider the enclosed document identified in this paper and in the attached Form PTO/SB/08B during the course of examination of this application.

Respectfully submitted,

HOWSON AND HOWSON  
Attorneys for Applicant

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## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Application Number	10/696,900
Filing Date	October 30, 2003
First Named Inventor	Wilson et al
Group Art Unit	1635
Examiner Name	Brian A. Whiteman
Attorney Docket Number	GNV31AUSA/K1774CON

Sheet	1	of	1
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[illegible]

Examiner  
Signature

Date  
Considered

\* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

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